DECLARATION FOR TILITY OR DESIGN PAINT APPLICATION

ATTORNEY'S DOCKET NO.: HARMSEN 3.3-002

As a below-named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole in	iventor (if only one name is listed b	elow) or an original, first and joi	nt inventor (if plural names are	
listed below) of the subject matter which is			A IN METERINARY	
USE OF THE E.COLI STR.		REATING DIARRHOE	A IN VEIERINARY	
MEDICINE the specification of which is attached hereto	1			
	r 18, 1998 as United States A	endination Number of BCT Inte	ernational Application Number	
· · · · · · · · · · · · · · · · · · ·		application Number of FC1 Inte	armational Application Number	
PCT/EP98/07389 and was amended				
I hereby state that I have reviewed and un amendment specifically referred to above.	derstand the contents of the above-i	dentified specification, including	the claims, as amended by any	
I acknowledge the duty to disclose informa-	ation which is material to patentabili	ity as defined in Title 37, Code of	Federal Regulations, § 1.56.	
I hereby claim foreign priority benefits un certificate or § 365(a) of any PCT internalisted below and have also identified belo having a filing date before that of the apple	ational application which designated w any foreign application for paten ication on which priority is claimed:	I at least one country other than it or inventor's certificate, or any	the United States of America,	
PRIOR FOREIGN APPLICATION(S	5)	DATE OF FILING		
COUNTRY	APPLICATION NUMBER	DATE OF FILING (month, day, year)	PRIORITY CLAIMED	
COCIVIRI	THE DESIGNATION OF THE PARTY OF	(monthly day, year)		
Germany	197 51 907.5	November 22, 1997	YES NO	
			YES NO	
			YES NO	
LISTING OF FOREIGN APPLICATION	ONS CONTINUED ON PAGE 3 HE	REOF YES NO		
I hereby claim the benefit under Title 35,	United States Code, § 119(e) of any	United States provisional applica	ition(s) listed below:	
Application 1		Filing Date:		
Application Number:		Filing Date:		
I hereby claim the benefit under Title 35, application designating the United States o not disclosed in the prior United States o States Code, § 112, I acknowledge the du Regulations, § 1.56 which became available of this application:	f America, listed below and, insofar r PCT international application in ty to disclose information which is	r as the subject matter of each of the manner provided by the first material to patentability as define	the claims of this application is paragraph of Title 35, United ed in Title 37, Code of Federal	
U.S. Parent Application Serial Number:	Parent Filing	Date: Par	ent Patent No.:	
U.S. Parent Application Serial Number: Pare		Date: Par	ent Patent No	
PCT Parent Number:	Parent Filing I	Parent Filing Date:		
LISTING OF US APPLICATIONS CONT	TINUED ON PAGE 3 HEREOF: [☐ YES ⊠ NO		
POWER OF ATTORNEY: As a named in to transact all business in the Patent and Transact all business in the Patent all	nventor, I hereby appoint the follow rademark Office connected therewit	ing registered practitioner(s) to ph: Customer Number 000530	prosecute this application and	

DIRECT ALL CORRESPONDENCE TO: Customer No. 000530





I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further, that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thezeon.

Full name of sole or first inventor (given na	8	
Sixed Inventor's signature	(a 179 years	Date
Residence: Hagen, Germany		ì
Post Office Address Rosenstrasse 102	, D-58095 Hagen, Germany	
Full name of second joint inventor, if any (g	given name, family name)	
Second Inventor's signature		Date
Residence Post Office Address	Citizenship:	
Full name of third joint inventor, if any (give	en name, family name):	
Third Inventor's signature		Date
Residence. Post Office Address:	Citizenship:	
Full name of fourth joint inventor, if any (gi	ven name, family name):	
Fourth Inventor's signature		Date
Residence Post Office Address	Citizenship:	
Full name of fifth joint inventor (given name	e, family name):	
Fifth Inventor's signature		Date
Residence. Post Office Address.	Citizenship:	
Full name of sixth joint inventor, if any (give	en name, family name):	
Sixth Inventor's signature		Date
Residence Post Office Address	Citizenship:	
Full name of seventh joint inventor, if any (g	given name, family name):	
Seventh Inventor's signature		Date
Residence Post Office Address:	Citizenship:	
Full name of eighth joint inventor, if any (gi	iven name, family name):	
Eighth Inventor's signature		Date
Residence Post Office Address:	Citizenship:	
Additional inventors are being named on	separately numbered sheets attached hereto.	